

# Aston Care Limited

# The Paddocks

## Inspection report

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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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# Summary of findings

## Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

The Paddocks is a residential care home providing personal care for up to 5 people who have a learning disability and/or autism. At the time of the inspection 5 people were living at the home.

### People's experience of using this service and what we found

#### Right Culture

This is a targeted inspection that followed up the warning notice served at the previous inspection around how well led the service was. Based on our inspection there had been improvements around some areas highlighted in the warning notice. However, systems to audit the service were still being developed. Some areas of the registered manager oversight lacked structure and was not embedded into practice.

The provider was completing more detailed visits focussing on the quality and safety of care. Audits did not always contain sufficient detail or cover relevant areas. Policies and procedures accessible to the staff were still not in line with legislation and current guidance. There was a delay to new policies being produced by a third party. Following the inspection the provider shared with us draft versions they were working on.

Systems to manage safeguarding were now in place and external parties were being notified appropriately. There was now a clear staff structure in the home to support the registered manager to run it. Additionally, an extra layer of senior management had been put in place by the provider to support the registered manager with improvements. Systems were now in place to ensure staff were receiving appropriate training to support the needs and wishes of people.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 31 August 2022).

At the last inspection we served a warning notice around good governance. At this inspection we found improvements had been made and the provider had met most of the warning notice. The provider remained in breach of regulations around governance as further improvements were required and needed embedding into practice.

### Why we inspected

We undertook this targeted inspection to check whether the warning notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

#### Enforcement and Recommendations

The provider remains in breach of regulations found at the last inspection. These relate to keeping people safe from potential abuse, mitigating risks to people, making decisions for people who lack capacity or have fluctuating capacity, lack of staff training and management of the home.

Although there have been improvements in the three months since we served a warning notice the provider remains in breach of governance systems at this inspection.

The recommendations from the last inspection around recruitment and end of life care remain. We have also made a recommendation at this inspection about the provider's knowledge of regulations in order to oversee the home.

#### Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

## Is the service well-led?

Inspected not rated.

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

# The Paddocks

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 on a concern we had about systems to manage the service.

#### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

The Paddocks is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Paddocks is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spent time with people and observing the interactions with staff. We spoke with the operations manager, registered manager and staff who were working. We reviewed a range of records related to the management of the service including policies and procedures, audits and risk assessments.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

At our last inspection systems were not established to assess, monitor and mitigate risks to the health, safety and welfare of people using the service placing them at risk of harm. This was a continued breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We served a warning notice and told the provider to meet Regulation 17 within three months of the last inspection. We went back to check that the warning notice had been met.

- Some improvements had been made in respect of the systems to monitor, assess and mitigate risks to people. Examples were some audits were being used and in places had more detail. The registered manager now had a monthly oversight audit covering a range of areas. However, these were inconsistent and recording lacked information. Where actions had been identified, there was no clear plan when this should be completed and who was responsible.
- Systems to monitor and manage the risk of legionnaires had improved. Annual water checks were now completed. However, the water temperature checks were not being completed in line with health and safety executive guidance to ensure the temperatures were safe.
- Since the last inspection the provider had increased their oversight of the service and improved the form they use. This included speaking with people and staff during the visits and reviewing various aspects of care. People signed the form to say they had spoken with the provider. However, there were areas the provider was not looking at such as medicine management. This meant there was limited additional oversight to reduce accidents and incidents.
- The provider had also recently appointed an operations manager who introduced their own visits. However, the form they were using was unsuitable as it appeared to be for large, older people homes. It contained nothing about people with learning disabilities or autistic people. Some of the new audits shared with the registered manager also reflected this issue. The operations manager told us it was a temporary form and they were updating it in the new year to be more relevant.
- Policies and procedures available to staff were still not in line with current best practice and legislation.

This included still listing restraints which were dangerous and referred to training which staff now did not have. Additionally, all policies and procedures recorded they should have been updated in either April or March 2021; they had not been. The management had been updating some policies although had not yet made them accessible to staff.

Systems were still not robust enough to assess, monitor and mitigate risks to the health, safety and welfare of people. This was a continued breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We recommend the provider take action to improve their knowledge and understanding of regulatory requirements to help them have a better understanding of operating a care home and driving improvements.

- Following the inspection, the provider shared with us a complete set of drafted policies and procedures they were working on. These would replace all the current policies in place for staff to refer to.
- Systems were now in place to manage safeguarding and learn lessons from them. There was clear oversight. This included sending information to external bodies in a timely manner in line with statutory requirements.
- The registered manager had worked hard since the last inspection to drive improvement at their home. Additionally, they had joined many management groups and attended training to increase their knowledge around running a home for people with learning disabilities and autistic people. Further plans were in place for them to continue this learning.



This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance  Systems were not robust enough to assess, monitor and mitigate risks to the health, safety and welfare of people.